

**Complaint Challenging Library Resources**

**CPS School Name:** \_\_\_\_\_

**Requested by (name):** \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Group Affiliation (if any):** \_\_\_\_\_

**Material in question:**

Format: ☐ Book ☐ Periodical ☐ Video/DVD ☐ Audiotape ☐ CD-ROM  
☐ Other (please specify)

Title: \_\_\_\_\_

Author/Editor: \_\_\_\_\_

Publisher: \_\_\_\_\_

**Please respond to each question below:**

- 1) To what in the material do you object? Please be specific. Cite pages, sections, frames, etc.
- 2) Did you read/view/hear the entire work? ☐ Yes ☐ No
- 3) If not, which part did you read or view?
- 4) How do you think students will be impacted by exposure to this work?
- 5) Are you aware of professional evaluations of this material?
- 6) Do you believe there is any value in this item?
- 7) What do you want the school to do about this material?
  - a. ☐ Do not require my child to use this material
  - b. ☐ Other (please specify)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PLEASE RETURN COMPLETED FORM TO LIBRARIAN OR PRINCIPAL**